## ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

## **Memorial Hospital**

City: Logansport County: Cass Year: 2004

Provider Type: General Acute Hospital

	I. Inpatient Care				
Hospital Service Description				Average Charge Per Discharge	
Burn Care	0	0	0	\$0	
Cardiac Intensive	0	0	0	\$0	
ICU Med/Surg	6	160	625	\$3,845	
ICU Neonatal	0	0	0	\$0	
ICU Pediatric	0	0	0	\$0	
Medical/Surgical	62	1,902	6,446	\$3,167	
Neonatal Intermed	0	0	0	\$0	
Obstetrics	15	590	1,256	\$1,808	
Pediatric	0	0	0	\$0	

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	83	2,652	8,327	NA
Normal Newborn	15	567	1,252	\$1,377

II. Outpatient Visits				
Circulatory System	8,040	Digestive System	2,172	
Endocrine System	5,984	Injuries and Poison	5,377	
Mental Disorder	801	Musculoskeletal	4,698	
Neoplasms	1,795	Nervous	1,404	
Respiratory	3,167	Urinary	3,967	
Other/Unknown	11,455	Total Visits	48,860	
Number of Visits to Emerg	14,341			
Percent of Emergency Department Visits of Total Visits			29.4%	

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## Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	N - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractice Service
Y - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	N - Home Health Service
N - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
N - Magnetic Resonance (MRI)	N - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Opthalmic Surgery	N - Optometric Service	N - Organ Bank
N - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	Y - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
N- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	N- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure NR =		Not reported

<u>Health Care Regulatory Services</u>

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